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The Law Offices of Mikio Ishimaru

Intellectual Property Law
Patents - Licensing - Strategy - & Related Matters
1110 Sunnyvale-Saratoga Road, Suite A1
Sunnyvale, CA 94087
Telephone: (408) 738-0592
Fax: (408) 738-0881

Fax

To: Mail Stop AMENDMENT From: Mikio Ishimaru
Examiner Mursalin B. Hafiz

Fax: (571) 273-8300 Pages: 3, including this page
TC 2814 - Before Final

Phone: 571-272-0237 Date: August 12, 2005

Re: U.S. Patent Application Serial
No. 10/791,098 Atty Docket no.: 1000-286

☒ Response to Restriction Requirement ☐ Information ☐ Other

IMPORTANT

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Vickie Ishimaru

With reference to serial number 10/791,098, the following are being submitted:

- Fax Cover Sheet with Certificate of Transmission (1 page)
- Transmittal for Enclosures (1 page)
- Response to Restriction Requirement (1 page)

Docket No.: H1850

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Darin A. Chan et al.

Confirmation No.: 2472

Serial No.: 10/791,098

Examiner: Mursalin B. Hafiz

Filed: Mar 1, 2004

Group Art Unit: 2814

For:

SELECTABLE OPEN CIRCUIT AND
ANTI-FUSE ELEMENT, AND
FABRICATION METHOD THEREFOR

TRANSMITTAL FOR ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Response to Restriction Requirement	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Before Final	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Information Disclosure Statement, PTO Form-1449, & cited Reference(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Fax Cover Sheet with Certificate of Transmission
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

The fee, if required, has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	20	20	0	x \$50 =	\$ 0.00
Independent Claims	4	4	0	x \$200 =	\$ 0.00
If multiple claims newly presented, add \$300					
Fee for extension of time					
Other:					
TOTAL FEE					\$0.00

- ☐ Please charge Deposit Account No. 01-0365 in the amount of \$ 0.00. An additional copy of this transmittal sheet is submitted herewith.
- ☒ The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment, to Deposit Account No. 01-0365, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

Mikio Ishimaru
Registration No. 27,449
Date: August 12, 2005

Docket Number: H1850

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Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventors: Darin A. Chan et al.	Confirmation No: 2472
Application No.: 10/791,098	Examiner: Mursalin B. Hafiz
Filed: 3/1/2004	Group Art Unit: 2814
Title: SELECTABLE OPEN CIRCUIT AND ANTI-FUSE ELEMENT, AND FABRICATION METHOD THEREFOR	

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

RESPONSE TO RESTRICTION REQUIREMENT

Sir/Madam:


In response to the Office Action of August 4, 2005, wherein restriction has been required, Applicants respectfully elect Claims 1-10 with traverse and without waiving any rights for reconsideration.

Claims 11-20 are to be held in abeyance for preparation of a divisional application in the event reconsideration is denied. Applicants respectfully request reconsideration of the requirement for restriction and that the requirement be removed.

☒ No additional fee is required

At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 01-0365 pursuant to 37 CFR 1.25.

Respectfully submitted,


Mikio Ishimaru
Reg. No. 27,449
August 12, 2005

The Law Offices of Mikio Ishimaru
1110 Sunnyvale-Saratoga Road, Suite A1
Sunnyvale, CA 94087-2554
Tel: (408) 738-0592
Fax: (408) 738-0881